Indiana State Police Clandestine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	3/12/2014	Address:	7612 HIGHLAND RD
Incident #:	14ISPC002047		GRANDVIEW
County:	SPENCER		INDIANA 47615
Type of Laboratory Seizure (check one) Seizure Location (check all that apply)			check all that apply)
☑ Operational Lab☐ Chemical/Glassware/Equipment (only)☐ Dumpsite (only)		☐ Residence☐ Outbuilding☐ Vehicle	☐ Hotel/Motel ☐ Open — No Structure ☐ Other:
(check all that	: Location (bedroom, kitchen, open air, of apply) or Birch Reaction(s): BEDROOM	etc)	
Red Phosphorous/Iodine Reaction(s):			
Hydrochloric Acid Gas Generator(s):			
☐ Flammable Solvents: BEDROOM / KITCHEN			
Water Reactive Metal (Lithium): <u>BEDROOM</u>			
Anhydrous Ammonia: <u>BEDROOM</u>			
Corrosive Acid:			
Corrosive Base: <u>BEDROOM / KITCHEN</u>			
Other (item and location):			
Vehicle Info	rmation:		
Owner: VIN: Year:		Make: Model:	
☐ Yes ☑ No	age 18 discovered (check appropriate) (number present) not present but evidence they reside	unclean Estimated ler occurring: U	tions of home: clean disarray ngth of time manufacturing had been NKNOWN nformation:
This report l	has been faxed* or emailed to the fo	llowing agencies tha	at serve the location:
Fire Department City, Township or County CHRISNEY VFD Health Department County: SPENCER CO HD Fax: 812-362-8668 Fax: Fax (812) 649-6047 Department of Child Services Hotline: dcshotlinereports@dcs.in.gov Fax: 317-234-7595 or 317-234-7596			
	ormation regarding this methamphetan Officer: TED CLAMME Phon	nine laboratory, cont e <u>812-867-2079</u>	act

*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.